

United States Bankruptcy Court NORTHERN District of ILLINOIS		Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Meurk, Michael		Name of Joint Debtor (Spouse)(Last, First, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): NONE		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):	
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 3797		Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all):	
Street Address of Debtor (No. & Street, City, and State): 749 Debra Drive Des Plaines IL		Street Address of Joint Debtor (No. & Street, City, and State):	
		ZIPCODE	
County of Residence or of the Principal Place of Business: Cook		County of Residence or of the Principal Place of Business:	
Mailing Address of Debtor (if different from street address): SAME		Mailing Address of Joint Debtor (if different from street address):	
		ZIPCODE	
Location of Principal Assets of Business Debtor (If different from street address above): NOT APPLICABLE		ZIPCODE	
Type of Debtor (Form of organization) (Check one box.)		Nature of Business (Check all applicable boxes)	Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and provide the information requested below.) <i>State type of entity:</i> _____		<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Nonprofit Organization qualified under 11 U.S.C. § 501(3)(c).	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <input checked="" type="checkbox"/> Chapter 13
Filing Fee (Check one box)		Nature of Debts (Check one box)	
<input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3A.		<input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business	
Check one box:		Chapter 11 Debtors:	
<input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).		Check if:	
		<input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million.	
Statistical/Administrative Information			
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.			
THIS SPACE IS FOR COURT USE ONLY			
Estimated Number of Creditors		1- 50- 100- 200- 1,000- 5,001- 10,001- 25,001 50,001- OVER 49 99 199 999 5,000 10,000 25,000 50,000 100,000 100,000	
Estimated Assets		\$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million \$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001 to \$100 million More than \$100 million	
Estimated Debts		\$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million \$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001 to \$100 million More than \$100 million	

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		
Name of debtors: Michael Meurk		
Prior Bankruptcy Case Filed Within Last 8 Years		(If more than one, attach additional sheet)
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor		(If more than one, attach additional sheet)
Name of Debtor:	Case Number:	Date Filed:
District:	Relationship:	Judge:
<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition</p>		
<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.</p> <p>I further certify that I delivered to the debtor the noticed required by §342(b) of the Bankruptcy code.</p> <p>X /s/ Paul M. Bach 1/5/2006 <small>Signature of Attorney for Debtor(s) Date</small></p>		
<p style="text-align: center;">Exhibit C</p> <p>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health and safety?</p> <p><input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No</p>		
<p style="text-align: center;">Certification Concerning Debt Counseling by Individual/Joint Debtor(s)</p> <p><input checked="" type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition.</p> <p><input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling to filing based on exigent circumstances. (Must attach certification describing)</p>		
<p style="text-align: center;">Information Regarding the Debtor (Check the Applicable Boxes)</p> <p>Venue (Check any applicable box)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principle assets in the United States in this District, or has no principle place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interest of the parties will be served in regard to the relief sought in this District.</p>		
<p style="text-align: center;">Statement by a Debtor Who Resides as a Tenant of Residential Property <i>Check all applicable boxes.</i></p> <p><input type="checkbox"/> Landlord has a judgement for possession of debtor's residence. (If box checked, complete the following.)</p> <hr/> <p style="text-align: center;">(Name of landlord or lessor that obtained judgement)</p> <hr/> <p style="text-align: center;">(Address of landlord or lessor)</p> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgement for possession, after the judgement for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p>		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of debtors: Michael Meurk
Signatures	
<p>Signature(s) of Debtor(s) (Individual/Joint)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by §342(b) of the Bankruptcy Code.</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X /s/ Michael Meurk _____ Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p>Telephone Number (If not represented by attorney) 1/5/2006 _____ Date</p>	<p>Signature of a Foreign Representative of a Recognized Foreign Proceedings</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign main proceeding, and that I am authorized to file this petition. A certified copy of the order granting recognition is attached.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed name of Foreign Representative)</p> <p>1/5/2006 _____ (Date)</p>

Signature of Attorney**X /s/ Paul M. Bach**

Signature of Attorney for Debtor(s)

Paul M. Bach 06209530

Printed Name of Attorney for Debtor(s)

Law Firm of Paul M. Bach

Firm Name

1955 Shermer Road, Unit 150

Address

Northbrook IL 60062**847-564-0808**

Telephone Number

1/5/2006

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

1/5/2006

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. §110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. §110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of bankruptcy Petition Preparer

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principle, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; Required by 18 U.S.C. § 156.

Form B22C (Chapter 13) (10/05)

In re Michael Meurk
 Debtor(s)
 Case number: _____
 (If known)

Check the box as directed in Parts I, III, and IV of this statement.

- Disposable income determined under § 1325(b)(3)**
 Disposable income not determined under § 1325(b)(3)

STATEMENT OF CURRENT MONTHLY INCOME AND DISPOSABLE INCOME CALCULATION

FOR USE IN CHAPTER 13

In addition to Schedule I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

Part I. CALCULATION OF CURRENT MONTHLY INCOME

1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. <input checked="" type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. <input type="checkbox"/> Married, not filing jointly. Complete only Column A ("Debtor's Income") for Lines 2-10. (Under revision) c. <input type="checkbox"/> Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.											
2	Gross wages, salary, tips, bonuses, overtime, commissions.	\$6,000.00	\$0.00									
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference on Line 3. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part III. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 25%;">a.</td><td style="width: 50%;">Gross receipts</td><td style="width: 25%; text-align: right;">\$0.00</td></tr> <tr> <td>b.</td><td>Ordinary and necessary business expenses</td><td style="text-align: right;">\$0.00</td></tr> <tr> <td>c.</td><td>Business income</td><td style="text-align: right;">Subtract Line b from Line a</td></tr> </table>	a.	Gross receipts	\$0.00	b.	Ordinary and necessary business expenses	\$0.00	c.	Business income	Subtract Line b from Line a	\$0.00	\$0.00
a.	Gross receipts	\$0.00										
b.	Ordinary and necessary business expenses	\$0.00										
c.	Business income	Subtract Line b from Line a										
4	Rent and other real property income. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part III. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 25%;">a.</td><td style="width: 50%;">Gross receipts</td><td style="width: 25%; text-align: right;">\$0.00</td></tr> <tr> <td>b.</td><td>Ordinary and necessary operating expenses</td><td style="text-align: right;">\$0.00</td></tr> <tr> <td>c.</td><td>Rental income</td><td style="text-align: right;">Subtract Line b from Line a</td></tr> </table>	a.	Gross receipts	\$0.00	b.	Ordinary and necessary operating expenses	\$0.00	c.	Rental income	Subtract Line b from Line a	\$0.00	\$0.00
a.	Gross receipts	\$0.00										
b.	Ordinary and necessary operating expenses	\$0.00										
c.	Rental income	Subtract Line b from Line a										
5	Interest, dividends, and royalties.	\$0.00	\$0.00									
6	Pension and retirement income.	\$0.00	\$0.00									
7	Regular contributions to the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include contributions from the debtor's spouse if Column B is completed.	\$0.00	\$0.00									
8	Unemployment compensation. Enter the amount in Column A and, if applicable, Column B. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td><td style="width: 33%;">Debtor \$0.00</td><td style="width: 33%;">Spouse \$0.00</td></tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$0.00	Spouse \$0.00	\$0.00	\$0.00						
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$0.00	Spouse \$0.00										

	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.		
9	a. _____ b. _____ c. _____ d. _____	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00
10	Subtotal of current monthly income. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	\$6,000.00	\$0.00
11	Total current monthly income. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		\$6,000.00

Part II. APPLICATION OF § 1325(b)(3)

12	Annualized current monthly income. Multiply the amount from Line 11 by the number 12 and enter the result.	\$72,000.00
13	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>ILLINOIS</u> b. Enter debtor's household size: <u>4</u>	\$70,357.00
14	Application of § 1325(b)(3). Check the applicable box and proceed as directed. <input type="checkbox"/> The amount on Line 12 is less than or equal to the amount on Line 13. Check the box at the top of page 1 of this statement that states "Disposable income not determined under § 1325(b)(3)" and complete Part VI of this statement; do not complete Parts III, IV, or V. <input checked="" type="checkbox"/> The amount on Line 12 is more than the amount on Line 13. Check the box at the top of page 1 of this statement that states "Disposable income determined under § 1325(b)(3)" and complete the remaining parts of this statement.	

Complete Parts III, IV, and V of this statement only if required. (See Line 14.)

Part III. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)		
Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)		
15	National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$1,564.00
16	Local Standards: Housing and Utilities. Enter the amount of the IRS Housing and Utilities Standards allowance fro your county and family size (this information is available at www.usdoj.gov/ust or from the clerk of the bankruptcy court), adjusted to deduct any portion of the allowance that includes payments on debts secured by your home, listed in Line 37. (Under revision)	\$1,796.00
17	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. <input checked="" type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more. Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$257.00

18	<p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 37; subtract Line b from Line a and enter the result in Line 18. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">a.</td> <td>IRS Transportation Standards, Ownership Costs, First Car</td> <td style="text-align: right;">\$ \$0.00</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 37</td> <td style="text-align: right;">\$ \$0.00</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs, First Car	\$ \$0.00	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 37	\$ \$0.00	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$0.00
a.	IRS Transportation Standards, Ownership Costs, First Car	\$ \$0.00									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 37	\$ \$0.00									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.									
19	<p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 18.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 37; subtract Line b from Line a and enter the result in Line 19. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">a.</td> <td>IRS Transportation Standards, Ownership Costs, Second Car</td> <td style="text-align: right;">\$ \$0.00</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 37</td> <td style="text-align: right;">\$ \$0.00</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs, Second Car	\$ \$0.00	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 37	\$ \$0.00	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$0.00
a.	IRS Transportation Standards, Ownership Costs, Second Car	\$ \$0.00									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 37	\$ \$0.00									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.									
20	<p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.</p>	\$600.00									
21	<p>Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.</p>	\$0.00									
22	<p>Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life, or for any other form of insurance.</p>	\$0.00									
23	<p>Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 39.</p>	\$0.00									
24	<p>Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.</p>	\$0.00									
25	<p>Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare. Do not include payments made for children's education.</p>	\$0.00									
26	<p>Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance listed in Line 29.</p>	\$0.00									
27	<p>Other Necessary Expenses: telecommunication services. Enter the average monthly expenses that you actually pay for cell phones, pagers, call waiting, caller identification, special long distance, or internet services necessary for the health and welfare of you or your dependents. Do not include any amount previously deducted.</p>	\$50.00									
28	<p>Total Expenses Allowed under IRS Standards. Enter the total of Lines 15 through 27</p>	\$4,267.00									
<p>Subpart B: Additional Expense Deductions under § 707(b)</p> <p>Note: Do not include any expenses that you have listed in Lines 15-27</p>											

29	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the average monthly amounts that you actually expend in each of the following categories and enter the total.			
	a. Health Insurance	\$0.00		\$0.00
	b. Disability Insurance	\$0.00		
	c. Health Savings Account	\$0.00		
		Total: Add Lines a, b, and c		
30	Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 24.			\$0.00
31	Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law.			\$0.00
32	Home energy costs in excess of the allowance specified by the IRS Local Standards. Enter the average monthly amount by which your home energy costs exceed the allowance in the IRS Local Standards for Housing and Utilities. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.			\$0.00
33	Education expenses for dependent children under 18. Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.			\$0.00
34	Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.			\$0.00
35	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).			\$0.00
36	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 29 through 35.			\$0.00
Subpart C: Deductions for Debt Payment				
37	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Do not include items you have previously deducted, such as insurance and real estate taxes.			
				\$2,177.25
			Total: Add Lines a - e	

38	<p>Past due payments on secured claims. If any of the debts listed in Line 37 are in default, and the property securing the debt is necessary for your support or the support of your dependents, you may include in your deductions 1/60th of the amount that you must pay the creditor as a result of the default (the "cure amount") in order to maintain possession of the property. List any such amounts in the following chart and enter the total. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt in Default</th> <th>1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td>Ameriquest Mortgage Co</td> <td>749 Debra Drive, Des Plaines, IL</td> <td>\$915.00</td> </tr> <tr> <td>b.</td> <td></td> <td></td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td></td> <td></td> <td>\$0.00</td> </tr> <tr> <td>d.</td> <td></td> <td></td> <td>\$0.00</td> </tr> <tr> <td>e.</td> <td></td> <td></td> <td>\$0.00</td> </tr> <tr> <td align="right" colspan="3"></td> <td>Total: Add Lines a - e</td> </tr> </tbody> </table>				Name of Creditor	Property Securing the Debt in Default	1/60th of the Cure Amount	a.	Ameriquest Mortgage Co	749 Debra Drive, Des Plaines, IL	\$915.00	b.			\$0.00	c.			\$0.00	d.			\$0.00	e.			\$0.00				Total: Add Lines a - e	\$915.00
	Name of Creditor	Property Securing the Debt in Default	1/60th of the Cure Amount																													
a.	Ameriquest Mortgage Co	749 Debra Drive, Des Plaines, IL	\$915.00																													
b.			\$0.00																													
c.			\$0.00																													
d.			\$0.00																													
e.			\$0.00																													
			Total: Add Lines a - e																													
39	<p>Payments on priority claims. Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.</p>			\$0.00																												
40	<p>Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>a.</td> <td>Projected average monthly Chapter 13 plan payment.</td> <td>\$1,719.00</td> </tr> <tr> <td>b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</td> <td>x 0.083</td> </tr> <tr> <td>c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td>Total: Multiply Lines a and b \$</td> </tr> </table>			a.	Projected average monthly Chapter 13 plan payment.	\$1,719.00	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x 0.083	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b \$	\$142.68																			
a.	Projected average monthly Chapter 13 plan payment.	\$1,719.00																														
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x 0.083																														
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b \$																														
41	<p>Total Deductions for Debt Payment. Enter the total of Lines 37 through 40.</p>			\$3,234.93																												
Subpart D: Total Deductions Allowed under § 707(b)(2)																																
42	<p>Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 28, 36, and 41.</p>			\$7,501.93																												

Part IV. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)			
43	<p>Total current monthly income. Enter the amount from Line 11.</p>		\$6,000.00
44	<p>Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, included in Line 7, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.</p>		\$0.00
45	<p>Qualified retirement deductions. Enter the monthly average of (a) all contributions or wage deductions made to qualified retirement plans, as specified in § 541(b)(7) and (b) all repayments of loans from retirement plans, as specified in § 362(b)(19).</p>		\$0.00
46	<p>Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 42.</p>		\$7,501.93
47	<p>Total adjustments to determine disposable income. Add the amounts on Lines 44, 45, and 46 and enter the result.</p>		\$7,501.93
48	<p>Monthly Disposable Income Under § 1325(b)(2). Subtract Line 47 from Line 43 and enter the result.</p>		(\$1,501.93)

Part V: ADDITIONAL EXPENSE CLAIMS																		
49	<p>Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Expense Description</th> <th>Monthly Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td>\$0.00</td> </tr> <tr> <td>b.</td> <td></td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td></td> <td>\$0.00</td> </tr> <tr> <td align="right" colspan="2"></td> <td>Total: Add Lines a, b, and c</td> </tr> </tbody> </table>			Expense Description	Monthly Amount	a.		\$0.00	b.		\$0.00	c.		\$0.00			Total: Add Lines a, b, and c	
	Expense Description	Monthly Amount																
a.		\$0.00																
b.		\$0.00																
c.		\$0.00																
		Total: Add Lines a, b, and c																

Part VI: VERIFICATION

50

I declare under penalty of perjury that the information provided in this statement is true and correct. *(If this a joint case, both debtors must sign.)*

Date: _____ Signature: /s/ Michael Meurk _____
(Debtor)

Date: _____ Signature: _____
(Joint Debtor, if any)

In re Michael Meurk
Debtor(s)

DISPOSABLE INCOME CALCULATION - SUPPLEMENTAL PAGE

In re Michael Meurk _____/ Debtor Case No. _____
(if known)

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C-Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption		Amount of Secured Claim
		Husband--H Wife--W Joint--J Community--C		
749 Debra Drive, Des Plaines, IL 60018	Fee Simple		\$ 313,000.00	\$ 313,000.00
No continuation sheets attached			TOTAL \$ (Report also on Summary of Schedules.)	313,000.00

FORM B6B (10/05) West Group, Rochester, NY

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C-Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases. If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

Type of Property	N o n e	Description and Location of Property	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.		<i>Cash on hand</i> <i>Location: In debtor's possession</i>	\$ 40.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	<i>Checking account</i> <i>Location: In debtor's possession</i>	\$ 120.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X	<i>Furniture, etc</i> <i>Location: In debtor's possession</i>	\$ 900.00
4. Household goods and furnishings, including audio, video, and computer equipment.	X	<i>Personal clothing</i> <i>Location: In debtor's possession</i>	\$ 450.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6. Wearing apparel.	X		
7. Furs and jewelry.	X		
8. Firearms and sports, photographic, and other hobby equipment.	X		
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10. Annuities. Itemize and name each issuer.	X		
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c); Rule 1007(b)).	X		
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.		<i>Meurk Construction Company</i> <i>Location: In debtor's possession</i>	\$ 200.00

In re Michael Meurk

/ Debtor

Case No. _____

(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts Receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers and other vehicles.		<p><i>1981 Cadillac, not running</i> <i>Location: In debtor's possession</i></p> <p><i>2003 Dodge Ram 3500, 36,000 miles</i> <i>Location: In debtor's possession</i></p>		\$ 50.00 \$ 19,000.00

In re *Michael Meurk*

/ Debtor

Case No.

(if known)

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N o n e	Description and Location of Property	Husband--H	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
			Wife--W	Joint--J
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			

Page 3 of 3

Total →

\$ 20,760.00

(Report total also on Summary of Schedules.)
Include amounts from any continuation sheets attached.

In re

Michael Meurk

/ Debtor

Case No. _____

(if known)

SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

Check if debtor claims a homestead exemption that exceeds \$125,000.

(Check one box)

11 U.S.C. § 522(b) (2):

11 U.S.C. § 522(b) (3):

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
<i>749 Debra Drive, Des Plaines, IL 60018</i>	<i>735 ILCS 5/12-901</i>	\$ 7,500.00	\$ 313,000.00
<i>Cash on hand</i>	<i>735 ILCS 5/12-1001(b)</i>	\$ 40.00	\$ 40.00
<i>Checking account</i>	<i>735 ILCS 5/12-1001(b)</i>	\$ 120.00	\$ 120.00
<i>Furniture, etc</i>	<i>735 ILCS 5/12-1001(b)</i>	\$ 900.00	\$ 900.00
<i>Personal clothing</i>	<i>735 ILCS 5/12-1001(a)</i>	\$ 450.00	\$ 450.00
<i>Meurk Construction Company</i>	<i>735 ILCS 5/12-1001(b)</i>	\$ 200.00	\$ 200.00
<i>1981 Cadillac, not running</i>	<i>735 ILCS 5/12-1001(b)</i>	\$ 50.00	\$ 50.00
<i>2003 Dodge Ram 3500</i>	<i>735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b)</i>	\$ 1,200.00 \$ 690.00	\$ 19,000.00

FORM B6D (10/05) West Group, Rochester, NY

In re Michael Meurk / Debtor Case No. _____
(if known)

SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column marked "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including Zip Code	C o d e b t o J--Joint C--Community	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Amount of Claim Without Deducting Value of Collateral			Unsecured Portion, if any
			C o n t i n g e n t	U n l i q u i t e d	D i s p u t e d	
Account No: 0966 Creditor # : 1 Americredit P.O. Box 78143 Phoenix Arizona 85062-8426		2003 car loan Value: \$ 19,000.00			\$ 15,000.00	\$ 0.00
Account No: 0966 Representing: Americredit		David Frankel 30 N. LaSalle St Suite 2850 Chicago IL 60602 Value:				
Account No: Creditor # : 2 Americredit 505 City Parkway West Suite 100 Orange California 92868		Mortgage on Principal Residenc Value: \$ 313,000.00			\$ 264,707.08	\$ 6,707.08
Account No: Representing: Americredit		Pierce & Associates 1 North Dearborn, Suite 1300 Chicago IL 60602 Value:				
			Subtotal \$ (Total of this page)	\$ 279,707.08		
			Total \$ (Use only on last page)			

1 continuation sheets attached

FORM B6D (10/05) West Group, Rochester, NY

In re Michael Meurk

/ Debtor

Case No. _____

(if known)

SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address Including Zip Code	C o d e b t o r C--Community	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Amount of Claim Without Deducting Value of Collateral			Unsecured Portion, if any
			C o n t i n g e n t	U n l i q u e n t	D i s p u t e d	
Account No:						\$ 0.00
<i>Creditor # : 3 Ameriquest 505 City Parkway West Suite 100 Orange California 92868</i>		<i>Arrearage on mortgage</i>				\$ 55,000.00
		Value: \$ 313,000.00				
Account No:						
<i>Representing: Ameriquest</i>		<i>Pierce & Associates 1 North Dearborn, Suite 1300 Chicago IL 60602</i>				
		Value:				
Account No:						\$ 4,000.00
<i>Creditor # : 4 Cook County Collector P.O. Box 802448 Chicago IL 60680-2445</i>		<i>2004 real estate taxes 749 Debra Drive, Des Plaines, IL 60018</i>				\$ 4,000.00
		Value: \$ 313,000.00				
Account No:						\$ 3,800.00
<i>Creditor # : 5 Cook County Collector P.O. Box 802448 Chicago IL 60680-2445</i>		<i>2003 real estate taxes 749 Debra Drive, Des Plaines, IL 60018</i>				\$ 3,800.00
		Value: \$ 313,000.00				
Account No:						
		Value:				
Account No:						
		Value:				

Sheet No. 1 of 1 continuation sheets attached to Schedule of Creditors

Holding Secured Claims

Subtotal \$ (Total of this page)	62,800.00
Total \$ (Use only on last page)	342,507.08

In re Michael Meurk / Debtor

Case No. _____
(if known)

SCHEDULE E-CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, custom duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

No continuation sheets attached

FORM B6F (10/05) West Group, Rochester, NY

In re Michael Meurk

/ Debtor

Case No. _____

(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. 112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n i q u i d d a t e d	D i s p u t e d	Amount of Claim without deductiong value of collateral
						H--Husband W--Wife J--Joint C--Community
Account No: 7413						\$ 2,700.00
<i>Creditor # : 1 Amoco Oil Co. c/o OSI Collection Services PO Box 965 Brookfield WI 53008</i>		<i>Credit Card Purchases</i>				
Account No: 8720						\$ 539.52
<i>Creditor # : 2 Bose Corporation The Mountain M/S Framingham MA 01701-9168</i>						
Account No: 0601		<i>Credit Card Purchases</i>				\$ 1,860.07
<i>Creditor # : 3 Capital One P.O. Box 85015 Richmond Virginia 23285-5015</i>						
Account No: 0040		<i>Credit Card Purchases</i>				\$ 779.00
<i>Creditor # : 4 Capital One P.O. Box 85015 Richmond Virginia 23285-5015</i>						
<i>3 continuation sheets attached</i>						Subtotal \$
						(Total of this page)
						Total \$
						(Report total also on Summary of Schedules)

FORM B6F (10/05) West Group, Rochester, NY

In re Michael Meurk / Debtor Case No. _____

(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n i q u i d a t e d	D i s p u t e d	Amount of Claim without deduction value of collateral
Account No: 1544 <i>Creditor # : 5 Capital One P.O. Box 85015 Richmond Virginia 23285-5015</i>	H--Husband W--Wife J--Joint C--Community	<i>Credit Card Purchases</i>				\$ 756.58
Account No: 1917 <i>Creditor # : 6 Capital One Services 11011 West Broad St. Glen Allen VA 23060</i>		<i>Credit Card Purchases</i>				\$ 1,585.78
Account No: 0071 <i>Creditor # : 7 Comcast Cable c/o Credit Protection Assn PO Box 173885 Denver CO 80217-3885</i>		<i>service</i>				\$ 188.94
Account No: <i>Creditor # : 8 ComEd System Credit/Bankruptcy Dept 2100 Swift Drive Oak Brook IL 60523</i>		<i>service arrears</i>				\$ 534.00
Account No: 0698 <i>Creditor # : 9 Crunch, Inc. 7222 W. Cermak Road, #715 North Riverside IL 60546</i>		<i>Re: 6547 N. Artesian, Chicago, IL 60645</i>				\$ 1,400.00
Account No: <i>Creditor # : 10 Executive Interiors 517 E. Lincoln Avenue Arlington Height IL 60005</i>		<i>Re: 658 Central Ave, Highland Pk, IL</i>		X		\$ 1,797.50

Sheet No. 1 of 3 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	6,262.80
Total \$	
(Report total also on Summary of Schedules)	

FORM B6F (10/05) West Group, Rochester, NY

In re Michael Meurk / Debtor Case No. _____

(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n i q u i d a t e d	D i s p u t e d	Amount of Claim without deduction value of collateral
Account No:					X	\$ 135.00
<i>Creditor # : 11 Ferleger & Assoc, LTD 134 N. LaSalle St, # 720 Chicago IL 60602</i>	H--Husband W--Wife J--Joint C--Community	01M1 122405, pd by agreement				
Account No:						\$ 0.00
<i>Creditor # : 12 Home Depot c/o Blatt, Hasenmiller, et al 2 N. LaSalle St, #900 Chicago IL 60602-3702</i>						
Account No:						\$ 0.00
<i>Creditor # : 13 Household Finance c/o Midland Credit Management PO Box 939019 San Diego CA 92193-9019</i>						
Account No:		pd by agreement		X		\$ 100.00
<i>Creditor # : 14 Larry Goldsmith c/o Ferleger & Assoc 29 S. LaSalle St, #300 Chicago IL 60602</i>						
Account No:						\$ 472.44
<i>Creditor # : 15 Michael P. Anderson, CPA 709 N. Forest Avenue Mount Prospect IL 60056</i>						
Account No:		service arrears				\$ 605.00
<i>Creditor # : 16 Nicor Gas Attention Bankruptcy & Collect P.O. Box 549 Aurora Illinois 60507</i>						

Sheet No. 2 of 3 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	1,312.44
Total \$	
(Report total also on Summary of Schedules)	

FORM B6F (10/05) West Group, Rochester, NY

In re Michael Meurk / Debtor Case No. _____

(if known)

SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n i q u i d a t e d	D i s p u t e d	Amount of Claim without deduction value of collateral
Account No:						\$ 2,500.00
<i>Creditor # : 17 O'Donnell & Assoc 1515 Woodfield Road Suite 880 Schaumburg IL 60173</i>	H--Husband W--Wife J--Joint C--Community					
Account No: 9195						\$ 538.80
<i>Creditor # : 18 Sears Capital Management Svcs, Inc 726 Exchange Street, #700 Buffalo NY 14210</i>						
Account No: 2388						\$ 200.00
<i>Creditor # : 19 Wide Open West c/o Credit Collection Services 2 Wells Avenue Newton MA 02459</i>						
Account No:						
Account No:						
Account No:						
Account No:						

Sheet No. 3 of 3 continuation sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal \$ (Total of this page)	3,238.80
Total \$ (Report total also on Summary of Schedules)	16,692.63

In re Michael Meurk

/ Debtor

Case No. _____

(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "minor child" and do not disclose the child's name. See 11 U.S.C 112 Fed.R.Bankr.P. 1007(m).

Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, including Zip Code, of other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

In re Michael Meurk

/ Debtor

Case No. _____

(if known)

SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California Idaho, Louisiana, Nevada, New Mexico, Puerto Rico Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided in the debtor's community property state, commonwealth, or territory. In community property states, a married debtor not filing a joint case should

Name and Address of Codebtor	Name and Address of Creditor

In re Michael Meurk / Debtor Case No. _____
 (if known)

SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status: Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP <i>daughter</i> <i>son</i> <i>daughter</i>	AGE <i>20</i> <i>19</i> <i>17</i>
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation	<i>Construction</i>	
Name of Employer	<i>Self employed</i>	
How Long Employed	<i>32 years</i>	
Address of Employer	<i>749 Debra Drive Des Plaines IL 60016</i>	
Income: (Estimate of average monthly income)		
Current Monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ <u>6,000.00</u>	\$ <u>0.00</u>
Estimated Monthly Overtime	\$ <u>0.00</u>	\$ <u>0.00</u>
SUBTOTAL	\$ <u>6,000.00</u>	\$ <u>0.00</u>
LESS PAYROLL DEDUCTIONS		
a. Payroll Taxes and Social Security	\$ <u>0.00</u>	\$ <u>0.00</u>
b. Insurance	\$ <u>0.00</u>	\$ <u>0.00</u>
c. Union Dues	\$ <u>0.00</u>	\$ <u>0.00</u>
d. Other (Specify):	\$ <u>0.00</u>	\$ <u>0.00</u>
SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>0.00</u>	\$ <u>0.00</u>
TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>6,000.00</u>	\$ <u>0.00</u>
Regular income from operation of business or profession or farm (attach detailed statement)	\$ <u>0.00</u>	\$ <u>0.00</u>
Income from Real Property	\$ <u>0.00</u>	\$ <u>0.00</u>
Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>0.00</u>
Social Security or other government assistance	\$ <u>0.00</u>	\$ <u>0.00</u>
Specify:	\$ <u>0.00</u>	\$ <u>0.00</u>
Pension or retirement income	\$ <u>0.00</u>	\$ <u>0.00</u>
Other monthly income	\$ <u>0.00</u>	\$ <u>0.00</u>
Specify:	\$ <u>0.00</u>	\$ <u>0.00</u>
TOTAL MONTHLY INCOME	\$ <u>6,000.00</u>	\$ <u>0.00</u>
TOTAL COMBINED MONTHLY INCOME (Report also on Summary of Schedules)	\$ <u>6,000.00</u>	

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

In re Michael Meurk

/ Debtor

Case No. _____

(if known)

SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	1,927.25
Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Utilities: Electricity and heating fuel		
Water and sewer	\$	200.00
Telephone	\$	45.00
Other	\$	75.00
Other	\$	0.00
Other	\$	0.00
Other	\$	0.00
Home maintenance (Repairs and upkeep)	\$	100.00
Food	\$	550.00
Clothing	\$	75.00
Laundry and dry cleaning	\$	25.00
Medical and dental expenses	\$	50.00
Transportation (not including car payments)	\$	100.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	30.00
Charitable contributions	\$	0.00
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$	57.00
Life	\$	0.00
Health	\$	0.00
Auto	\$	95.00
Other	\$	0.00
Other	\$	0.00
Other	\$	0.00
Taxes (not deducted from wages or included in home mortgage)		
Specify: Self employment tax	\$	600.00
Installment payments: (in chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Alimony, maintenance, and support paid to others	\$	0.00
Payments for support of additional dependents not living at your home	\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
Other: Real Estate Taxes	\$	334.00
Other: personal grooming	\$	20.00
Other:	\$	0.00
TOTAL MONTHLY EXPENSES		(Report also on Summary of Schedules)
	\$	4,283.25

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly Income	\$	6,000.00
B. Total projected monthly expenses	\$	4,283.25
C. Excess Income (A minus B)	\$	1,716.75
D. Total amount to be paid into plan each: Monthly	\$	1,716.75

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re **Michael Meurk**

Case No.
Chapter **13**

/ Debtor

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages on each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	AMOUNTS SCHEDULED		
			ASSETS	LIABILITIES	OTHER
A-Real Property	Yes	1	\$ 313,000.00		
B-Personal Property	Yes	3	\$ 20,760.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	2		\$ 342,507.08	
E-Creditors Holding Unsecured Priority Claims	Yes	1		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$ 16,692.63	
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 6,000.00
J-Current Expenditures of Individual Debtor(s)	Yes	1			\$ 4,283.25
TOTAL			\$ 333,760.00	\$ 359,199.71	

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

In re **Michael Meurk**

Case No.
Chapter 13

/ Debtor

STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159)
[Individual Debtors Only]

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

The forgoing information is for statistical purposes only under 28 U.S.C. § 159.

In re Michael Meurk _____ / Debtor Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 17 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: 1/5/2006

Signature /s/ Michael Meurk
Michael Meurk

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

In re **Michael Meurk**

Case No.
Chapter 13

/ Debtor

Attorney for Debtor: **Paul M. Bach**

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

1. The undersigned is the attorney for the debtor(s) in this case.
2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
 - a) For legal services rendered or to be rendered in contemplation of and in connection with this case \$ 2,500.00
 - b) Prior to the filing of this statement, debtor(s) have paid \$ 0.00
 - c) The unpaid balance due and payable is \$ 2,500.00
3. \$ 189.00 of the filing fee in this case has been paid.
4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and
None other
6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and
None other
7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:
None
8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:
None

Dated: **1/5/2006**

Respectfully submitted,

X/s/ Paul M. Bach
Attorney for Petitioner: **Paul M. Bach**

Law Firm of Paul M. Bach
1955 Shermer Road, Unit 150
Northbrook IL 60062

Americredit
P.O. Box 78143
Phoenix, Arizona 85062-8426

Ameriquest
505 City Parkway West
Suite 100
Orange, California 92868

Amoco Oil Co.
c/o OSI Collection Services
PO Box 965
Brookfield , WI 53008

Bose Corporation
The Mountain M/S
Framingham, MA 01701-9168

Capital One
P.O. Box 85015
Richmond, Virginia 23285-5015

Capital One Services
11011 West Broad St.
Glen Allen, VA 23060

Comcast Cable
c/o Credit Protection Assn
PO Box 173885
Denver, CO 80217-3885

ComEd
System Credit/Bankruptcy Dept
2100 Swift Drive
Oak Brook, IL 60523

Cook County Collector
P.O. Box 802448
Chicago, IL 60680-2445

Crunch, Inc.
7222 W. Cermak Road, #715
North Riverside, IL 60546

David Frankel
30 N. LaSalle St
Suite 2850
Chicago, IL 60602

Executive Interiors
517 E. Lincoln Avenue
Arlington Height, IL 60005

Ferleger & Assoc, LTD
134 N. LaSalle St, # 720
Chicago, IL 60602

Document Page 33 of 33
c/o Blatt, Hasenmiller, et al
2 N. LaSalle St, #900
Chicago, IL 60602-3702

Household Finance
c/o Midland Credit Management
PO Box 939019
San Diego, CA 92193-9019

Larry Goldsmith
c/o Ferleger & Assoc
29 S. LaSalle St, #300
Chicago, IL 60602

Michael Meurk
749 Debra Drive
Des Plaines, IL 60018

Michael P. Anderson, CPA
709 N. Forest Avenue
Mount Prospect, IL 60056

Nicor Gas
Attention Bankruptcy & Collect
P.O. Box 549
Aurora, Illinois 60507

O'Donnell & Assoc
1515 Woodfield Road
Suite 880
Schaumburg, IL 60173

Paul M. Bach
1955 Shermer Road, Unit 150
Northbrook, IL 60062

Pierce & Associates
1 North Dearborn, Suite 1300
Chicago, IL 60602

Sears
Capital Management Svcs, Inc
726 Exchange Street, #700
Buffalo, NY 14210

Wide Open West
c/o Credit Collection Services
2 Wells Avenue
Newton, MA 02459